

## **Appendix H**

### **Record Keeping and Documentation**

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On the pages that follow are examples of forms that can be used to document illicit discharges/disposal and illicit connections.

## Appendix H Record Keeping And Documentation

### Illicit Discharge/Connection Reporting and Response

Date/Time:	<input type="text"/>		
Reported by:	<input type="text"/>		
Address:	<input type="text"/>		
Phone:	<input type="text"/>		
Location:	<input type="text"/>		
Report:	<b>Material</b> <input type="checkbox"/> Hazardous <input type="checkbox"/> Sediment <input type="checkbox"/> Wastewater <input type="checkbox"/> Other _____ <input type="checkbox"/> Oil/Grease <input type="checkbox"/> Unknown		<b>Land Use</b> <input type="checkbox"/> Residential <input type="checkbox"/> Commercial <input type="checkbox"/> Industrial <input type="checkbox"/> Public
Est. Quantity:	<input type="text"/>		
Direct/Constructed Connections Found? <input type="checkbox"/> Yes <input type="checkbox"/> No			
Description:	<input type="text"/>		
Source Investigation Conducted?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Source Identified?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Source/Owner of Discharge/ Connection:	<input type="text"/>		
Entered Storm Drain System/Receiving Waters? <input type="checkbox"/> Yes <input type="checkbox"/> No			
<i>Action and Closure</i>			
Referred To:	<input type="text"/>		
Phone:	<input type="text"/>		
City:	<input type="text"/>		
Dept.:	<input type="text"/>		
Action Taken:	<input type="text"/>		
Date Closed:	<input type="text"/>		

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LOS ANGELES COUNTY DEPARTMENT OF PUBLIC WORKS

## UNDOCUMENTED CONNECTION / ILLICIT DISCHARGE

CHECK ONE: <input type="checkbox"/> Suspected Illicit Connection <input type="checkbox"/> Illicit Discharge		DATE DISCOVERED: DATE INVESTIGATED:	
If Illicit Discharge is selected, describe actions taken:			
*Facility # (MMS)		MMS Work Order #	
Susp. Illicit Connection to: <input type="checkbox"/> Open Channel <input type="checkbox"/> Back of Catch Basin <input type="checkbox"/> Underground Storm Drain			
Storm Drain/Channel Name:		Line/Unit	
Location Description:			
Nearest cross-street:			
Observed Land Use: <input type="checkbox"/> Industrial <input type="checkbox"/> Commercial <input type="checkbox"/> Residential			
<b>CONNECTION DESCRIPTION</b>			
Station:                      +	Size: inches	Type:	Bank: Right / Left <small>(looking downstream)</small>
<b>FLOW DESCRIPTION</b>			
<input type="checkbox"/> Active <input type="checkbox"/> Dry			
<b>VISUAL FLOW QUALITY</b>			
<input type="checkbox"/> Clear <input type="checkbox"/> Discolored <input type="checkbox"/> Oily <input type="checkbox"/> Sewage <input type="checkbox"/> Visible Residue <input type="checkbox"/> Staining			
<input type="checkbox"/> Other (describe)		<div style="border: 1px solid black; height: 200px; width: 100%;"></div>	
Permit #	Date Permitted:		
<b>SUSPECTED OWNER INFORMATION</b>			
NAME:			
ST. ADDRESS:			
CITY:	ZIP:		
COMMENTS:			
WEATHER:			
INSPECTED BY:			
TITLE:	PHONE # (       )		

\* Facility# to be assigned by Watershed Management Division